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Application Number	09/740,597	
Filing Date	12-19-2000	
First Named Inventor	Bruce Barclay	
Art Unit	3738	
Examiner Name	PELLEGRINO, BRIAN E	
Attorney Docket Number	092341-040506/CIP	

I hereby revoke all previous powers of attorney given in the above-identified application.		
A Power of Attorney is submitted herewith.		
\overline{X} I hereby appoint the practitioners associated with the Customer Number: 35893		
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I am the: Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)		
SIGNATURE of Applicant or Assignee of Record		
Signature Chum		
Name Aaron Grossman, Vice President & General Counsel of LeMaitre Vascular, Inc.		
Date 12-22-07 Telephone (781) 221-2266		
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.		
$oxed{X}$ *Total of $oxed{l}$ forms are submitted.		

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